PTO/SR/08 (12-04)
Approved for use through 7/31/2008. OMB 0651-0032
setumers. Office; U.S. CEPARTY/ENT OF COMMERCE
ametica unless it displays a valid CMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-678 Effective Opcomber 8, 2004									191910011		
APPLICATION AS FILED -				-PARTI			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
			NUMBER FILED		NUMBER EXTRA		RATE (S)	FEE (S)		RATE (6)	FEE (D)
BASIC FEE			ea .		NZA		N/A	150.00	٠	NA	300.00
SEARCH FEE		i N	NYA		M.	ļ	NA	\$250		N/A	\$500
EXAMINATION FEE			N/A		M.		N/A	\$100		N/A	\$200
COTOTAL CLAIMS		<u> </u>					X\$ 25 · .		.OR	X\$50 .	·
	FR 1.16(II) PENDENT CLA	MS	minus 3 =				X100 .		•	X200 .	
(37 C	FR 1.16(N)	1000-000	Months o	and drawings of	cced 100						
FEE	UCATION 512E FR 1.15(4)	sheets of is \$250 (1	sheets of paper, the application size fee due to \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 GFR 1.16(s).					•		•	
							+180=			+360=	
MILL TIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(I))							TOTAL]	TOTAL	
* If the difference in column 1 is less than zero, enter "0" in column 2.											
APPLICATION AS AMENDED - PART II (Column 3)							SMALL	ENTITY	OR OTHER THAN SMALL ENTITY		
(Column 1) (Column 2)				PRESENT	1		ADDI-	1	RATE (8)	ADDI-	
4		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	EXTRA		RATE (\$)	TIONAL FEE (5)			TICNAL FEE (8)
EN	Total az cen 1460	. 10	Minus	23	•—		X\$ 25 .	·	OR	X\$50 .	
ENDM	Independent grown Life.	. 3	Minus.	-10			X100 _	<u> </u>	OR	X200 _	
É	Application Size Fee (37 CFR 1.16(s))					1.		<u> </u>	┨		
₹	PARŜT PRESENT	PRESENTATION OF MATIPLE DEPENDENT CLAIM (SJ CFR 1.16(1))					+180=		OR	+360=	
							TOTAL ADD'L FEE		OR	ADO'L FEE	
	· .	(Column 1)	109/	(Cotumn 2)	(Column 3)				-		
8	4/20/01	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (S)	ADDI- TIONAL FEE (5)		RATE (8)	ADOI- TIONAL FEE (\$)
ENT	Total	AMENDMENT.	Minus-	23	- \		X\$ 25 .		OR	X\$50 -	·
-	Independent OF OFR LINES	· 0.	Minus	- (-	\bigwedge	X100 .		OR	X200 .	<u> </u>
AMEND		o Fée (37 CFR 1.	G(s))	<i>\(\tau_{-} \)</i>	ļ	1	Z	7	7		-
1 2	FIRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (37 CFR 1.16(1))						+180=		OR	+360= /	
						_	TOTAL. ADD'L FEE	· .	ge.	ADD'L FEE	
• If the entry in column 1 is less than the entry in column 2, write "O' in column 3. If the "Highest Number Previously Paid For In This SPACE is less than 20, enter "20".											
"If the Highest Number Previously Peld For' IN THIS SPACE is less than 3, enter "3". "If the Highest Number Previously Peld For' IN THIS SPACE is less than 3, enter "3". The Highest Number Previously Peld For' (Total or independent) is the highest number found in the appropriate box in column 1.											

This collection of Information is required by 97 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of Information is required by 97 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, use application control to use users and the users of the users of the users of the sent to the Chief information Officer, U.S. Peters on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Peters on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Peters on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Peters on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Peters on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Peters on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Peters on the Individual Complete the Individual Complete this form and/or suggestion for reducing this burdon, should be sent to the Chief information Officer, U.S. Peters on the Individual Complete the In

If you need exsistence in completing the form, cell 1-800-PTO-9199 and select option 2.